

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Tea Party Patriots Citizens Fund		FEC IDENTIFICATION NUMBER ▼ C C00540898
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee UPS		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2016
Mailing Address 55 Glenlake Parkway NE		Amount 1656.37
City Atlanta	State GA	Zip Code 30328
Purpose of Expenditure Printing/Postage	Category/ Type 001	Transaction ID : SE.527893 Date of Disbursement or Obligation MM / DD / YYYY 10 / 17 / 2016
Name of Federal Candidate Trump, Donald, J., ,		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN
Calendar Year-To-Date Per Election for Office Sought 317524.26		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee CampaignHQ		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2016
Mailing Address 109 West Front St.		Amount 5775.00
City Brooklyn	State IA	Zip Code 52211
Purpose of Expenditure Telemarketing	Category/ Type 001	Transaction ID : SE.527902 Date of Disbursement or Obligation MM / DD / YYYY 10 / 17 / 2016
Name of Federal Candidate Trump, Donald, J., ,		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN
Calendar Year-To-Date Per Election for Office Sought 323299.26		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	7431.37
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Kilgore, Paul, A, Mr.,**[Electronically Filed]*

Date

MM / DD / YYYY
10 / 20 / 2016

Signature

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Victory Media Group			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2016		
Mailing Address 1701 East Lake Ave. Ste. 335			Amount 10550.40		
City Glenview	State IL	Zip Code 60025	Transaction ID : SE.527912		
Purpose of Expenditure Robocalls		Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 19 / 2016		
Name of Federal Candidate Trump, Donald, J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
			333849.66		

Full Name of Payee Victory Media Group			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2016		
Mailing Address 1701 East Lake Ave. Ste. 335			Amount 12239.84		
City Glenview	State IL	Zip Code 60025	Transaction ID : SE.527913		
Purpose of Expenditure Robocalls		Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 19 / 2016		
Name of Federal Candidate Trump, Donald, J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
			346089.50		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	22790.24
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Kilgore, Paul, A, Mr.,

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Full Name of Payee Creative Response Concepts		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2016	
Mailing Address 2760 Eisenhower Ave. 4th FL		Amount 550.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.527914 Date of Disbursement or Obligation MM / DD / YYYY 10 / 19 / 2016
Purpose of Expenditure Online Advertising		Category/Type 001	
Name of Federal Candidate Trump, Donald, J.,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NN
Calendar Year-To-Date Per Election for Office Sought 346639.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure		Category/Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	550.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	30771.61

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*Kilgore, Paul, A, Mr.,**[Electronically Filed]*

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